DATENT ADDITION FOR DESCRIPTION								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999									Orla	SH	000		
CLAIMS AS FILED - PART I								LL	ENTITY		OTHER	TUAN	
(Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA							TYP			OR	SMALL		
┡			NUMBER FILED NUMBER EXTRA				RAT	E	FEE	]	RATE	FEE	
BA	ASIC FEE						345.00	OR		690.00			
TC	OTAL CLAIMS		u	minus		X\$ 9	<del></del> -		OR	X\$18=			
INC	DEPENDENT C	LAIMS	8 minus 3 = - 5				X39	<del></del> -		1	X78=	290	
MULTIPLE DEPENDENT CLAIM PRESENT								-	·	OR	A/0=	210	
• If	the difference	ımn 1 is	less than 70	nelumn 0	+130	)=		OR	+260=				
* If the difference in column 1 is less than zero, enter "0" in column 2								۱L		OR	TOTAL	1000	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)											OTHER		
A	- 12 A	CL	AIMS		(Column 2) HIGHEST	(Column 3)	SMAI		ENTITY	OR 1 I	SMALL		
AMENDMENT A		A	IAINING TER NDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	E	ADDI- TIONAL FEE-		RATE	ADDI- TIONAL FEE	
Š	Total	Ŀ		Minus	-20	= /	X\$ 9	_		OR	X\$18=	,	
AME	Independent	<u>                                     </u>	e_	Minus	8	= / .	X39=				X78=		
	FIRST PRESE	NTATIO	ON OF MI	ULTIPLE DEI	PENDENT CLAIM		7.00-	$\dashv$		OR	A/6=		
/								=		OR	+260=		
								AL EE		OR ,	TOTAL ADDIT, FEE		
_	\$65 · 15.13键		umn 1) AIMS	F. Substant	(Column 2) HIGHEST	(Column 3)		_					
AMENDMENT B		Al	AINING FTER IDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	•		Minus	**	=		$\dashv$	FEE	<b> </b>		FEE	
	Independent	•		Minus	***	-	X\$ 9=			OR	X\$18=	···	
٧	FIRST PRESE	NTATIO	ON OF MI	ULTIPLE DEI	PENDENT CLAIM	<u> </u>	X39=			OR	X78=		
										OR	+260=		
							TOT ADDIT. FI			OR ,	TOTAL ADDIT. FEE		
<i>-</i>	<u> </u>		umn 1) Alms		(Column 2) HIGHEST	(Column 3)							
AMENDMENT C		AF	AINING TER IDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	•		Minus	**	_	V# 0	+	FEE	}		FEE	
	Independent	•		Minus	***	=	X\$ 9=	4		OR	X\$18=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	X78=		
+130=										OR	+260=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										L	TOTAL		
	וואו ובשונטורו סיטי	mber Pre	WOULD'V PS	けい トヘク けい ていけ	S SPACE is less that Independent) is the		DDIT. FE	EL		OR A	NNIT EEE		
001					opoineditty to 018	ingi 180mms inni	no in the	appr	opriate box	in colu	mn 1.	l	